



TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/857,456
		Filing Date	September 24, 2001
		First Named Inventor	Nicholas Gerard Byrne et al.
		Art Unit	1651
		Examiner Name	Lankford, Jr. Leon B.
Total Number of Pages in This Submission	3	Attorney Docket Number	061082-0005

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request (See Remarks) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) __ sheets <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Pre-Appeal Brief Request for Review <input checked="" type="checkbox"/> Notice of Appeal <input type="checkbox"/> Remarks in Support of Pre-Appeal Brief Request for Review <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none">• Return postcard•
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-0310.
On January 17, 2006 applicant filed a one month extension of time but mistakenly paid the large entity fee of \$120.00. Therefore it is believed that the amount due for the two month extension requested is \$105.00, if this is not correct the Examiner is authorized to debit the deposit account the proper fee.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual	Morgan, Lewis & Bockius LLP Thomas D. Kohler, Reg. No. 32,797
Signature	
Date	February 14, 2006

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	Don Mixon		
Signature		Date	February 14, 2006